	Effective October 1, 2000 09/720 / 18										18		
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE		OTHER T		
T	OTAL CLAIMS	, 			a de la companya de l		RAT	Έ	FEE	7	RATE	FEE	
=	OR		NUMBER FILED		NUMBER EXTRA		BASIC	FEE		OR	BASIC FEE	800	
TOTAL CHARGEABLE CLAIMS 50minus 2					· <i>30</i>			XS S	9=		OR	X\$18≃	540
INDEPENDENT CLAIMS /9 minus 3 = /					16		X40	)=		OR	X80=	1280	
MULTIPLE DEPENDENT CLAIM PRESENT								+135		<del></del>	OR	+270=	7000
If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	AL.	<u> </u>	OR	TOTAL	2688	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMA	SMALL ENTITY			OTHER THAN SMALL ENTITY		
	2 2	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	IEST BER DUSLY	PRES EXT		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 50	Minus	. )	טין	= ,-		X\$ 9	=		OR	X\$18=	U
	Independent	· /7	Minus		CLAIM			X40	-		OR	X80=	U
_	·	IRST PRESENTATION OF MULTIPLE D			CONIM			+135	=		OR	+270=	
								TO'	TAL	_	OR	TOTAL ADDIT. FEE	0
_		(Column 1) CLAIMS		(Colun		(Colur	nn 3)						
AMENDMEN D	:	REMAINING	2.112	NUMI PREVIO PAID	BER OUSLY	PRESEN EXTRA		' RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 46	Minus	<	50	= 1		X\$ 9	=		OR	X\$18=	
	Independent	NTATION OF ML	Minus	···	19	= 7		X40	=		OR	X80=	
	THO THESE	INTATION OF INC	CTIPLE DEF	ENDENT	CLAIM			+135			OR	+270=	
								TO'			OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colum	ทก 2)	(Colur	mn 3)	AUUII, F				ADDIT. FEE	
	िस्ट १८ वर्षे संविद्या	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRES EXT		RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=		X\$ 9	=		OR	X\$18=	
-	Independent	NTATION OF A	Minus		CO AIRA	] -	$\dashv$	X40	_		OR	X80=	
	TINOT PRESE	NTATION OF MU	JETTE DE	- ENDEN!	CLAIM			+135	_		OR	+270=	
1	f the entry in colu If the "Highest Nur	mn 1 is less than th mber Previously Pa	e entry in colu	mn 2, write S SPACE i	e TOT un co	kumn 3. In 20. en	iter "20 °		TAL		OR	TOTAL	
•	If the Thighest Ku	mber Previously Pa	aid For" IN THI	S SPACE	is less tha	an 3. ente	er "3."	ADDIT. F		omoriate bo	4	ADDIT. FEE	L
	1 PTO-675 8-00)				,							PARTMENT O	F COMMERC
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FORM PTO-875

blication or Docket Number